Certification Exams Q & A

This Question and Answer (Q & A) component to the CMTO website is part of our larger commitment to transparency, as mandated by the Ministry of Health and Long-Term Care, and fairness. Sharing this information with our key audiences and stakeholders, including students, candidates, teachers and program coordinators, will enable universal and equitable accessibility to information for all.

This Q & A, which will be updated regularly, addresses issues related to the 2015 Certification Examinations, which reflects the Inter-Jurisdictional Entry-to-Practice Competencies and Performance Indicators. We have supplied as much detail as possible, here, without compromising the integrity of the examination.

The Q & A questions are broken into three, broad categories, one of which further breaks down, in order to help candidates, and other key audiences and stakeholders, find answers to their questions about exams as quickly and easily as possible:

- General questions;
- Questions specific to Objectively Structured Clinical Evaluation (OSCE) content;
  - Questions related to OSCE Station 3;
  - Questions related to OSCE Station 4;
- Questions specific to Multiple Choice Question (MCQ) content.

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**General Questions**

*Question:* How does CMTO approach current Massage Therapy (MT) research with respect to the Objectively Structured Clinical Evaluation (OSCE) and Multiple Choice Question (MCQ) evaluation?

*Answer:* The objective of CMTO’s MCQ and OSCE examinations is to protect the public through the maintenance of the standards for the profession. The exams are designed with specific legislative direction from the RHPA and MTA, and are reflective of the Inter-Jurisdictional Competency Standards (IJS) content outlines. From these directives – that is, IJS content outlines, legislation, Standards of Practice, and College Policy and Position Statements – the exams are developed. Every question or tasks on the exams is supported by at least two references from the approved reference list. This list, which is kept updated and current, contains quality and evidence-based texts by reputable authors, experts in...
their fields. This reference list is generated to support a fair, objective, standardized and defensible examination.

In addition, the curriculum of the MT educational training programs is derived and developed from the IJS content outlines. The curriculum should not only comprehensively cover all of the IJS competencies but it should also include a critical approach to treatments that reflects the complete scope of practice. Additionally, the approach to training students to critically assess relevant evidence and integrate research into MT practice falls under the MCQ content outline section 1.2.c.1.

While it is beneficial for students to be aware of current research and its implications for practice, the educational curriculum should provide comprehensive coverage that has a broad and practical application: The curriculum includes both new research findings and currently accepted practices, as reflected in the approved references texts.

The CMTO Certification examination publishes the approved reference list, thereby facilitating transparency. This list reflects the texts that are used by Ontario Massage Therapy schools. The texts are approved on the following considerations: academic rigour as indicated in the quality of referencing, evidence-based content and authors who are experts in their field.

As is evident, research is a big part of this. Incorporating research into practice is a dynamic and ongoing process that evolves over time as changes in practice evolve. This process is not unlike the way Standards of Practice are set out. There’s a reciprocal relationship: Evidence-based practice will continue to advance the profession, which is modified by this new learning. As novel findings and innovative approaches are adopted by the profession, they will become integrated into supporting textbooks in the field and, over time, adjustments will be made to reflect the new knowledge.

For more details on the content development process please refer to “Certification Services Content Development – A Detailed Overview.”

**Question:** If a student is given a scenario in a practical exam that relates to a pathological condition, can the student assume the condition has been diagnosed or is the student expected to obtain additional information in the consultation phases?

Further to this, the symptoms of a [diagnosed] pathological condition can vary with each client. We train students to clarify how the condition is affecting the client, in order to adapt the application to the specific needs of the client, which requires further information from the client. Is it acceptable for a student to approach a client for more information along these lines, or should the student provide treatment based on general symptoms and treatment protocols?

**Answer:** The Registered Massage Therapist (RMT) educational training programs provide comprehensive coverage of all Inter-jurisdictional Competency Standards (IJS), including a critical approach to treatments that address the complete RMT scope of practice. The approach to training described in your email falls within the IJS and seems to be an appropriate approach to training.

In all OSCE stations, the relevant information and required tasks are clearly outlined in the instruction page. The instructions provided are clear and are not meant to mislead candidates in how they approach the station. Candidates are expected to fully comply with all Massage Therapy (MT) standards of practice throughout the examination process and follow the directions outlined on the stems.
RMT clients are trained to respond in a standardized manner, which supports the specific scenario, and they would elicit a standardized response. This simulates the responses of a real client in an actual MT practice setting.

**Question:** When a client is turning from prone-supine or supine-prone, is it acceptable for the Massage Therapist (MT) to hold the sheets with his or her own body against the table while the client is turning over?

**Answer:** Candidates are expected to follow Standards of Practice throughout the examination process. Communication/Public Health Standard 12 outlines the way in which an MT may instruct or assist a client to change positions, when required during a treatment when undraping a client for treatment. Candidates are expected to use their own professional judgment as to what is appropriate, with the full expectation that candidates follow the Standards of Practice.

**Question:** Can candidates ask the examiners questions if they need direction?

**Answer:** No. Examiners are not able to provide information to candidates. In all OSCE stations, the relevant information and required tasks are clearly outlined on the instruction page, posted on both the outside and the inside of the door of each station. These instructions are clear; they are not meant to mislead candidates in how they approach the station. Candidates are free to reference these instructions at any time.

**Question:** What are the expectations when treating gluteal region? Will the clients wear the appropriate dress code to allow for proper gluteal draping?

**Answer:** The expectations for any draping are based on Standard 12 Communication/Public Health.

**Question:** Does the OSCE client dress code ensure that the candidate will be able to access all relevant structures during treatment or assessment?

**Answer:** As part of developing an objective, fair and standardized examination, there is set attire for clients reflecting the needs of each individual station. Candidates will have access to the structure or body area that they are asked to treat in the exam. The client will be wearing the proper attire required for that particular station.

**Questions Specific to OSCE Content**

**Question:** How would the integration of findings of other healthcare practitioners be addressed in the OSCE?
**Answer:** This competency can be included in any of the seven OSCE stations, either as information or direction on the instruction page for the candidates.

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**Question:** How will hydrotherapy be integrated into testing in the OSCE?

**Answer:** The integration of hydrotherapy may be part of any of the stations where candidates are required to provide hands-on treatment. If included, students will be advised on the instruction page, which is located on both the outside and the inside of the door of each station. Any necessary equipment would be provided for the candidates. This is a competency in the IJS content outline in section 3.2.e.

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**Question:** Can postural analysis be tested on the OSCE exam?

**Answer:** Postural analysis may be part of any of the stations where candidates are required to provide hands-on assessment. This is a competency in the IJS content outline in section 2.1.d.

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**Question:** Which type of lymph drainage would fall under the new content outline?

**Answer:** The OSCE content outline section 3.2.a.13 discusses the lymphatic drainage competencies that are testable. The certification exam only tests lymphatic techniques that appear in our approved reference list. Lymphatic drainage techniques may be part of any of the stations where candidates are required to provide hands-on treatment.

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**Question:** What are the expectations for the OSCE in regards to vital signs? For how long should the candidates count the pulse?

**Answer:** The vital signs competency is set in section 2.1.k. in the IJS content outline. This can be tested in any of the stations where candidates are required to provide hands-on assessment. If a candidate needs to determine a pulse, the candidate should hold for as long as they feel is appropriate to accurately determine the pulse.

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**Question:** For research purposes, would it be possible to have your College definition (or description) of a direct strain induction myofascial technique with the supporting references?

**Answer:** The CMTO OSCE content ([http://www.cmto.com/cmto-wordpress/assets/OSCE-UC-based-Content-Outline-10-3-2014.pdf](http://www.cmto.com/cmto-wordpress/assets/OSCE-UC-based-Content-Outline-10-3-2014.pdf)) outlines this competency 3.2.b.2 as within myofascial and more specifically fascial techniques. These competencies are supported by the Standards of Practice (Technique Standard 9 – Apply Deep Fascial Techniques).

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**Question:** I have a question about how the hydrotherapy will be incorporated into the OSCEs. In the past, towels labelled 'hot' and 'cold' have been available for the therapist's use - is that the same approach now? Also, candidates are not allowed to condense time but it seems that the use of hydro will require time to be shortened - can candidates verbally provide parameters and then continue with their treatment? Based on what we were instructed to do in previous years, an example could be post
friction ice: <using towel labelled 'cold'> "I am applying an ice pack for 15 minutes" <wait a couple of seconds then remove it>. Checking patient comfort seems a little manufactured but should the therapist check comfort as a matter of protocol? How specific of a modality do they need to provide?

**Question:** Does the same “NO HYDRO Rule” still apply, as per past terms? i.e. Any use of hydrotherapy are not necessary in the OSCE’s, and will not be marked if performed/mentioned. Was the exception in the Techniques station? Is there still an exception, or is hydro now a ‘must’ and will be marked accordingly for the OSCE’s?

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**Question:** Would hydrotherapy be applicable in the Remex station, where a candidate can instruct the standardized client on how to take an Epson Salts Bath, or to apply heat before stretching, or how to use ice for inflammation?

**Answer (for all four questions above):** Candidates will have clear instructions as to what task to perform at each station for any of the competencies tested based on the OSCE content outline, including hydrotherapy. All competencies listed in the CMTO IJCS-based content outline are testable in the OSCE. From an educational perspective, the schools are required to teach the hydrotherapy competencies as part of their curriculum. If students are adequately trained in this competency, then they should be sufficiently prepared to perform tasks related to the application of hydrotherapy during the OSCE. Again, the instruction page will direct the candidate on what is expected of them based on the tasks for the specific case scenario.

**Question:** What about taking client’s vitals? There is also a section in the new competencies document OSCE Outline about taking vitals, so in which station would this be applicable? Assessment 1, Assessment 2, Techniques, Client Interview, Treatment?

The vital signs competency is outlined in section 2.1.k. in the IJS content outline. Vital signs can be tested in any of the Stations where candidates are required to provide hands-on assessment. If a candidate needs to determine a pulse, then they should hold for as long as they feel is appropriate to accurately determine the pulse.

**Questions Related to OSCE Station 3**

**Question:** Should a candidate try to perform an orthopedics test that he or she does not recognize?

**Answer:** Candidates are expected to fully comply with all Massage Therapy Standards of Practice throughout the examination process and follow the directions outlined on the instruction page, located on both the outside and the inside of the door of each station. For all interactions with OSCE clients, candidates are expected to stay within the Scope of Practice; Stem instructions never direct candidates to perform tasks that are harmful to the client or outside the Scope of Practice.
Question: Given that there is a large number of orthopedic tests – some with variations and some with more than one name – how does the CMTO evaluate candidates fairly and consistently?

Answer: As mentioned in the “Certification Services Content Development – A Detailed Overview” on the CMTO website (http://www.cmto.com/cmto-wordpress/assets/Contentdevelopmentadetailedreview_03_20_2013.pdf), the team devoted to certification examination content development is comprised of subject matter experts. The examination of orthopedic tests is structured so that it accounts for different variations of a certain orthopedic test. The selected tests are cited by at least two or more references from the approved referenced list.

Question: If asked to perform dermatome and/or myotome tests, will it be stated on which side the tests are to take place? Or if it is simply stated to perform a unilateral dermatome/myotome, will the examiners need to specifically communicate that they would test bilaterally to obtain a proper comparative result?

Answer: The Candidate Handbook (http://www.cmto.com/cmto-wordpress/assets/Candidate-Handbook-2015.pdf) states this clearly: “The candidate is expected to demonstrate their ability to perform specific assessment techniques (e.g. palpation, range of motion, neurological, orthopaedic testing, etc.).” The instructions for all stations, including the Assessment 1 station, are very clear. Candidates are given explicit instructions on what behavior is expected, and they should take great care to follow these instructions.

There are situations where instructions and tasks are simplified for clarity or to ensure that candidates have adequate time to complete the station. For example, candidates are asked, on occasion, to perform certain tasks on one side of the body that they would typically perform bilaterally. In these cases, candidates should not waste time performing the task on both sides of the body. This is because examiners are not able to award points for time spent on the side of the body the candidate was not asked to treat. Additionally, candidates need not verbalize what they might do on the untreated side.

Questions Related to OSCE Station 4

Question: Is a neurological assessment always necessary as part of the assessment in Station 4?

Answer: All the necessary information and direction is clearly stated on the stem. With this said, candidates must still choose appropriate assessments – ones that they feel are relevant and may assist them “to determine the nature of the client’s presenting dysfunction” (as stated in the Candidate Handbook).

Questions Specific to MCQ Content

Question: What does it mean to “comply with federal and provincial requirements?” What is meant by “describe the framework of healthcare delivery in Canada?”

Answer: CMTO, and all of the regulatory Colleges in Ontario, occupy a unique space in the province’s healthcare system. CMTO was established by the provincial government to regulate the conduct of
Registered Massage Therapists (RMTs) in the province of Ontario through the provisions of the Regulated Health Professions Act, 1991 (RHPA).

As such a regulatory body, CMTO protects the public interest and guides RMTs in a way that ensures that RMTs comply with federal and provincial requirements. All relevant legislation is included at the end of the 2015 CMTO Certification Examination Approved References List on the CMTO website.

**Question:** Why are adjunctive therapies being tested?

**Answer:** As indicated in the “Transitioning the CMTO Certification Examination to the Inter-Jurisdictional Competency Standards,” issued to all schools on October 7, 2014, indications for adjunctive therapeutic modalities was included as a testable task on the MCQ content outline. This inclusion was the outcome of the discussions in the federally funded consortium of Massage Therapists, consisting of representatives from the three regulated provinces (Ontario, British Columbia and Newfoundland and Labrador). It was also part of the psychometric research and transition guidance process to create new and improved content outlines.